STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

BUREAU OF HEALTH SYSTEM REGULATION

DIVISION OF MEDICAL QUALITY ASSURANCE

In re: Kathleen Kodan, L.P.N.

Petition No.: 950411-11-008

## CONSENT ORDER

WHEREAS, Kathleen Kodan, L.P.N. of Stratford, CT (hereinafter "respondent") has been issued license number 023049 to practice as a licensed practical nurse by the Department of Public Health (hereinafter "the Department") pursuant to Chapter 378 of the Connecticut General Statutes, as amended; and,

WHEREAS, the Department alleges that:

On or about December 15, 1994, while working as a licensed practical nurse at Fairfield Manor Health Care Center, Norwalk, Connecticut, respondent failed to administer approximately 15 doses of medications, including cardiac medications and antibiotics, to various residents for whom such medications had been ordered.

WHEREAS, the above described facts constitute grounds for disciplinary action pursuant to Connecticut General Statutes Section 20-99(b)(2).

WHEREAS, respondent, in consideration of this Consent Order, has chosen not to contest the above allegations at a hearing before the Connecticut Board of Examiners for Nursing (hereinafter "the Board"). Respondent does not admit to having violated any statute or regulation, including but not limited to 20-99(b) of the General Statutes of Connecticut. Respondent further agrees that this Consent Order shall have the same effect as if proven and ordered after a full hearing held pursuant to \$19a-9, \$19a-14, and \$20-99 of the General Statutes of Connecticut.

NOW THEREFORE, pursuant to §19a-17 and §20-99(a) of the General Statutes of Connecticut, as amended, respondent hereby stipulates and agrees to the following:

- 1. That respondent waives her right to a hearing on the merits of this matter.
- That respondent shall comply with all federal and state statutes and regulations applicable to her profession.
- 3. That respondent's license number 023049 to practice as a licensed practical nurse in the State of Connecticut is hereby placed on probation for a period of two (2) years, subject to the following terms and conditions:
  - A. Respondent shall provide a copy of this Consent Order to all current and future employers for the duration of her probation.
  - P. Respondent shall not accept employment as a nurse for a personnel provider service, visiting nurse agency or home health care agency, and shall not be self-employed as a nurse for the period of her probation.
    - C. Respondent shall be responsible for the provision of written reports directly to the Board and the Department from her nursing supervisor (i.e., Director of Nursing) monthly for the entire period of probation. Employer reports shall include documentation of respondent's ability to safely and competently practice nursing, and shall be issued to the Board and the Department at the address cited in paragraph G below.
    - D. Respondent shall notify the Board and the Department in writing of any change of employment within fifteen (15) days of such change.

- E. Respondent shall notify the Board and the Department of any change in her home or business address within fifteen (15) days of such change.
- F. Monthly reports required in paragraph 3C are due on the tenth business day of every month commencing with the reports due 4/90.
- G. All correspondence and reports shall be addressed to:

Office of the Board of Examiners for Nursing
Department of Public Health
150 Washington Street
Hartford, CT 06106

- 4. That any violation of the terms of this Consent Order without prior written approval by the Board shall constitute grounds for the Department to seek revocation of the respondent's nursing license following notice and an opportunity to be heard.
- 5. That any extension of time or grace period for reporting granted by the Board shall not be a waiver or preclude the Board's right to take action at a later time. The Board shall not be required to grant future extensions of time or grace periods.
- 6. That legal notice of any action shall be deemed sufficient if sent to respondent's last known address of record reported to the Licensure and Registration Section of the Division of Medical Quality Assurance of the Department.
- 7. That this Consent Order is effective on the first day of the month immediately following the month in which this Consent Order is approved and accepted by the Board.
- 8. That respondent understands this Consent Order is a matter of public record.

- 9. That the Department's allegations as contained in this Consent Order shall be deemed true in any subsequent proceeding before the Board in which (1) her compliance with this same Consent Order is at issue, or (2) her compliance with \$20-99(b) of the General Statutes of Connecticut, as amended, is at issue.
- 10. That, in the event respondent violates a term of this Consent Order, respondent agrees immediately to refrain from practicing as a licensed practical nurse, upon request by the Department, with notice to the Board, for a period not to exceed 45 days. During that time period, respondent further agrees to cooperate with the Department in its investigation of the violation, and to submit to and complete a medical, psychiatric or psychological evaluation, if requested to do so by the Department; and, that the results of the evaluation shall be submitted directly to the Department. Respondent further agrees that failure to cooperate with the Department in its investigation during said 45 day period shall constitute grounds for the Department to seek a summary suspension of respondent's license. In any such summary action, respondent stipulates that her failure to cooperate with the Department's investigation shall be considered by the Board and shall be given due weight by the Board in determining whetherher conduct constitutes a clear and immediate danger as required pursuant to Connecticut General Statutes, sections 4-182(c) and 19a-17(c). The Department and respondent understand that the Board has complete and final discretion as to whether a summary suspension is ordered.
- 11. That, in the event respondent violates any term of this Consent Order, said violation may also constitute grounds for the Department to seek a summary suspension of her license before the Board.

- 12. That this Consent Order and terms set forth herein are not subject to reconsideration, collateral attack or judicial review under any form or in any forum. Further, this Consent Order is not subject to appeal or review under the provisions of Chapters 54 and 368a of the General Statutes of Connecticut, provided that this stipulation shall not deprive respondent of any other rights that she may have under the laws of the State of Connecticut or of the United States.
- 13. That respondent permits a representative of the Department to present this

  Consent Order and the factual basis for this Consent Order to the Board. The

  Department and respondent understand that the Board has complete and final

  discretion as to whether an executed Consent Order is approved or accepted.
- 14. That respondent has had the opportunity to consult with an attorney prior to signing this document.

I, Kathleen Kodan, L.P.N., have read the above Consent Order, and I agree to the terms set forth therein. I further declare the execution of this Consent Order to be my free act and deed.

<b>y</b>	Kathleen Kodan LPN
Subscribed and sworn to before me this	3th day of February 1996.
	Notary Public or person authorized Superior Co
	by law to administer an oath or
	affirmation
arries.	
The above Consent Order having been pres	
the Commissioner of the Department of Pu	ublic Health on the day of
february 1996, it is hereby a	• • • • • • • • • • • • • • • • • • • •
	Stanley K. Peck, Director
	Division of Medical Quality Assurance
The above Consent Order having been pres	sented to the duly appointed agent of
the Connecticut Board of Examiners for N	Jursing on the Or day of
1996, it is hereby order	red and accepted.
» BY:	Vance Befund
	Connecticut Board of Examiners for Nursing
GDB	

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1/96

## Certified Mail Return Receipt Requested No. P265408945

## STATE OF CONNECTICUT



## DEPARTMENT OF PUBLIC HEALTH

March 30, 1998

Kathleen Kodan 230 Brinsmayd Avenue Stratford, CT 06497

RE: Licensed Practical Nurse License No. 023049

Dear Ms. Kodan:

Please be advised that the probationary period of your registered nurse license has concluded. The probationary status of your license will be removed with an effective date of April 1, 1998.

Should you have any questions concerning this matter, please contact me at 860-509-7400.

Very truly yours,

Jeffrey A. Kardys Special Investigator

Health Systems Regulation

JAK: PROBEND.DOC

cc: Debra Tomassone, HSS, Licensure & Registration

Bonnie Pinkerton, Nurse Consultant, Health Systems Regulation

Phone: 860-509-7400

FAX 860-509-7650

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